DOCUMENT RESUME

ED 360 489 CE 064 094

TITLE	AIDS: Workplace Issues. INFO-LINE. Practical Guidelines for Training and Development Professionals. Issue 9208.
INSTITUTION	American Society for Training and Development, Alexandria, VA.
REPORT NO	ISSN-0287-8700
PUB DATE	Aug 92
NOTE	20p.
AVAILABLE FROM	American Society for Training and Development, P.O. Box 1443, Alexandria, VA 22313-2043 (1-4 copies: $10 each; 5-9 copies: $8.50 each; 10 or more: $7 each; plus shipping).
PUB TYPE	Guides - Non-Classroom Use (055)
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	*Acquired Immune Deficiency Syndrome; Check Lists; Disease Control; Disease Incidence; *Employer Employee Relationship; *Employment Practices; Equal Opportunities (Jobs); Fringe Benefits; Guidelines; *Health Care Costs; *Personnel Management; *Personnel Policy; Resource Materials; Training

ABSTRACT

Practical guidelines are presented for training and development professionals dealing with acquired immune deficiency syndrome (AIDS) in the workplace. The following topics are covered: AIDS in the workplace; AIDS basics, including information on the required corporate commitment and transmission of human immunodeficiency virus (HIV); employment issues (discrimination, health and safety issues, AIDS-related terms, health care and benefits, and other costs); AIDS policies (AIDS workplace policies, 10 principles for the workplace, provision of training for supervisors and managers, critical facts about AIDS, a sample AIDS policy, employee AIDS education, and a sample workshop outline); and the lessons that have been learned about AIDS. A reference section listing 30 articles, 14 booklets, and 7 resource organizations and an HIV/AIDS checklist conclude the guide. (MN)

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ED 360 489

INFO-LINE

Practical Guidelines
for Training and
Development Professionals

AIDS: Workplace Issues

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ASTD
American Society for Training and Development

August 1992

Issue 9208

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Education is crucial to reducing anxiety about AIDS in the workplace and is most effective when it precedes rather than follows a crisis.

Thomas J. Dilauro
Personnel Administrator

INFO-LINE is a series of practical booklets published monthly by the American Society for Training and Development, offering useful, how-to information for training and development professionals.

INFO-LINE is available by subscription, and single copies may be purchased. Please refer to the order form at the back of this issue.

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INFO-LINE (ISSN [illegible]-8700) is published monthly for $79 (for ASTD National members) and $119 (for nonmembers) for 12 issues by the American Society for Training and Development, P.O. Box 1443, Alexandria, VA 22313-2043. Second-class postage paid at Alexandria, VA. POSTMASTER: Send address changes to *INFO-LINE*, P.O. Box 1443, Alexandria, VA 22313-2043.

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AIDS in the Workplace

Jane, an accountant, recently returned to work after a period of short-term disability. During her absence, several co-workers commented on her recent weight loss and generally run-down appearance. Before management could squelch the rumors, the grapevine had informed the organization's workforce that Jane was suffering from a pneumonia commonly linked to Acquired Immunodeficiency Syndrome (AIDS).

On the day she returns to work—

- She's greeted by a show of compassion and understanding from her co-workers, who tell her that they've worked to establish a leave bank for her use if the illness becomes more serious, or
- Most of the accounting staff call in sick to protest having to work with someone with AIDS.

From both a business and humanistic standpoint, the first option is preferable. What would cause the different employee reactions to Jane? Often, the answer to the conundrum of employee attitudes towards working with people with AIDS is an employer-sponsored AIDS education program.

Although we, as a society, have been living with AIDS and the Human Immunodeficiency Virus (HIV) infections that cause AIDS for more than a decade, this disease's impact on the workplace has only recently been recognized. The federal Centers for Disease Control in Atlanta estimate that, in 1992, one in every 250 Americans are infected with HIV. If your workplace has not yet been involved in a case of a worker with HIV infection or AIDS, it is likely that you'll face the issue in the next five years.

This issue of *INFO-LINE* will discuss AIDS in the workplace and present suggested methods of moving employee attitudes from fear of contagion to compassion for co-workers with AIDS.

AIDS Basics

AIDS is the most serious stage of infection by the Human Immunodeficiency Virus (HIV). HIV damages the body's immune system, allowing the body to become susceptible to illnesses that a healthy immune system would resist. The virus enters the body through the bloodstream and usually attacks a specific type of white blood cell.

There typically is a long period of time between when a person contracts the virus and when the immune system begins to deteriorate significantly. People who are HIV infected can transmit the virus to others before they develop symptoms of HIV or AIDS. Most people who have HIV, however, will eventually develop AIDS.

It would have been easy to give in to fear, but we didn't. Today each of us can look in the mirror and say, "I did what was right, and I was a real human being, even though there were risks."

Shelia Brant
Inc.

CORPORATE COMMITMENT REQUIRED

Because HIV/AIDS is a "fatal, transmitted, and totally preventable disease, we have a mandate to utilize every type of communication channel available, including the worksite," asserts B.J. Stiles, president of the National Leadership Coalition on AIDS. Studies have found that workplace education, when properly handled, has more impact than that provided through government agencies or the media.

Stiles notes that there are several impediments to corporate participation in AIDS education programs:

- *Disbelief.* This is characterized by statements such as "The data is soft; besides, there are so few documented cases of AIDS in my (company, community) that it is just one thing I don't have to focus attention on."
- *Denial.* "Since AIDS is confined mostly to homosexuals and drug abusers, I don't need to worry. We don't employ any of 'them'."
- *Discomfort.* "If this is mostly transmitted as the result of drug use and sexual behaviors, that is a private matter and not appropriate to discuss as part of the work relationship. As long as employees do their jobs, I have no right to discuss their private lives with them."
- *Disregard.* "This is simply not a visible or pressing matter and I see no reason to devote time or resources to something which isn't an immediate priority."

Incentives for Involvement

The case for employer involvement, however, is compelling: The largest number of AIDS cases is among people aged 30 to 39. Eighty-five percent of all individuals who have AIDS in this country are from 20-49 years old and *currently employed.*

"Because there is something we can do about HIV/AIDS," Stiles continues, employers should realize that:

- *Stopping the transmission of HIV is essential* if a healthy employee population is to be maintained.
- *Employers can be effective educators.* In many instances, employers are quite influential in focusing attention on an issue that many employees avoid.
- *Employers may be the only source of trusted, unbiased information on a controversial topic.* Creating a sound policy and both supervisory and employee AIDS education programs "will result in clear and straightforward action, fair and balanced treatment of affected workers, and will reduce and perhaps eliminate conflicts, disruptions, and fear," Stiles says.

TRANSMISSION OF HIV

For the virus to spread, a person's infected blood, semen, or vaginal secretions must enter the bloodstream of another person. There are three main ways HIV is transmitted from one person to another:

- **Sexual Contact.** HIV is transmitted through both heterosexual and homosexual contact. It is most commonly spread through contact with an HIV-infected person's semen or vaginal fluids during unprotected vaginal or anal intercourse.
- **Blood-to-Blood Contact.** The virus is spread through sharing or reusing needles and syringes. On rare occasions, it has been spread to individuals accidentally stuck by an infected needle or syringe (needlestick injuries), or by having large quantities of infected blood splashed in the eyes or mouth, or having infected blood come into contact with damaged skin (chapped skin or cuts). Since 1985, blood donated for transfusions has been screened for HIV, greatly reducing the danger of contagion through blood transfusions.
- **Mother to Newborn.** Mothers may transmit the disease during pregnancy, delivery, and possibly by breast-feeding.

HIV is fragile; it is easily inactivated when exposed to heat, light, and cleaners such as bleach. Because it is fragile, HIV cannot be spread through casual contact (shaking hands, hugging, or sharing tools, restrooms, or water fountains), sneezing or coughing, or mosquito bites.

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Employment Issues

A recent study has shown that more than two-thirds of employers with more than 2,500 employees and nearly one in ten employers with fewer than 500 employees have had experiences with an employee with HIV infection or AIDS. In addition, the rate of infection is increasing in "tomorrow's workforce"—the young, women, and other minority groups.

"AIDS issues have generated more lawsuits than any other single disease. Under current law, employers may be held liable for discrimination against a person with AIDS for firing, refusing to hire, or even failing to make reasonable accommodations which will allow that employee to continue to work," writes the National Leadership Coalition on AIDS. The group stresses that AIDS is "preventable, and prevention is cost-effective. Your efforts will lower your costs."

AIDS education is more than simply a humanitarian question: It can have a positive impact on business operations. A walkout such as the one described earlier is costly but preventable. AIDS may have a bearing in several areas of business operations:

DISCRIMINATION

Employment discrimination against people with AIDS is prohibited by both federal and state laws and regulations. Although not intended as legal advice, the following encapsulates current laws:

FEDERAL LAW

- **The 1992 Americans With Disabilities Act** provides that "no covered entity [employer] shall discriminate against a qualified individual with a disability because of the disability of such individual in regard to job application procedures, the hiring, advancement, or discharge of employees, employee compensation, job training, and other terms, conditions, and privileges of employment." According to the Civil Rights Division of the U.S. Department of Justice, "Congress intended the ADA to protect persons with AIDS and HIV disease from discrimination."

  Under the law, employers may not refuse to hire qualified workers because they have or might have or are perceived to have HIV infections. In addition, they must make reasonable accommodations to allow such workers to continue to work. Accommodations may include job modifications, flexible scheduling, and leaves of absence.

  Employees who are related to, provide care for, or are associated with a qualified disabled person are also covered by the antidiscrimination provisions of ADA.

- **The Federal Vocational Rehabilitation Act** prohibits any entity that receives federal funds from discriminating against otherwise qualified handicapped persons. Cases decided under this act have opened the door for discrimination lawsuits based on AIDS and HIV infections.

STATE LAWS

More than 30 states currently have antidiscrimination laws covering AIDS and HIV infections, as do some local communities. In addition, Philadelphia, for example, requires that all employers of more than three people promulgate an AIDS-in-the-workplace policy and provide AIDS education programs.

For more information about the laws and regulations covering your organization, contact an attorney or your state or local labor or human relations board.

HEALTH AND SAFETY COSTS

Employers are required to provide employees with a safe place in which to work. HIV/AIDS has become a health and safety issue, especially for those workers who risk exposure to the disease on the job. Employers are expected to provide basic preventive education and protective measures for their workers.

Workers at risk of infection on the job are those who may come in contact with contaminated blood and certain body fluids on the job. This includes employees in hospitals, correctional institutions, mental health facilities, nursing homes, hospices, and emergency response operations.

GLOSSARY OF AIDS TERMS

Acute. A disease of short duration that often has abrupt, severe symptoms. Compare "chronic."

AIDS (Acquired Immunodeficiency Syndrome). A disease caused by infection with the HIV (Human Immunodeficiency Virus) that seriously damages a person's immune system, leaving it at high risk to infection.

Antibody. A protein in the blood produced in response to exposure to specific foreign substances. Part of the immune system designed to eliminate infectious microorganisms from the body.

AZT. See Zidovudine.

CDC (Centers for Disease Control). Part of the U.S. Department of Health and Human Services, CDC provides national health and safety guidelines and statistical data on AIDS and other diseases.

Chronic. A disease lasting a long time, or recurring often. Compare "Acute."

Condom. Condoms prevent the exchange of body fluids during sexual intercourse and reduce the risk of sexually transmitted diseases, including HIV.

ELISA (Enzyme-Linked Immunosorbent Assay). A blood test used to detect antibodies to HIV. It does not indicate if a person has AIDS; it shows whether a person is infected with the virus. ELISA is used to screen the U.S. blood supply.

Engineering controls. Protective measures taken to prevent exposure to a toxic substance by changing the equipment or instruments that are used to do the job.

Exposure. Coming into contact with an infectious agent or other toxic substance. May be either inorganic or organic.

False negative. A negative test result for a condition that is in fact present. For example, this could occur during the period before HIV antibodies have developed sufficiently to be detected by a screening test.

False positive. A positive test result for a condition that is in fact not present. For example, a "negative" or "indeterminate" result from a Western blot test after repeated positive results from ELISA. These results should be discussed with a medical authority.

Hepatitis B (HBV). A viral infection that damages the liver. Transmission of the virus is similar to AIDS.

HIV (Human Immunodeficiency Virus). The name of the virus that causes AIDS. Formerly, Human T-Lymphotropic virus type III/lymphadenopathy-associated virus (HTLV-III/LAV).

HIV positive. The condition of a person who has been tested and found to be infected with HIV.

Immune System. The body's system that attempts to destroy substances (viruses, bacteria, parasites) that are not part of the body and that may cause disease.

Infection. The invasion of the body by a disease-causing organism.

Kaposi's Sarcoma (KS). A cancer or tumor of the blood and/or lymphatic vessels. Symptoms are pink or purple blotches on white skin or brown blotches on brown skin.

Opportunistic infection. An infection caused by a microorganism that rarely causes disease in persons with normal defense mechanisms.

Pneumocystis Carinii Pneumonia (PCP). A lung infection that is the most common opportunistic infection in people with AIDS.

T-Lymphocyte cells. White blood cells that help direct and control the body's immune system to fight infections. These are the cells that are primarily targeted and destroyed by HIV.

Universal precautions. Precautions used by workers who may have occupational exposure to blood-borne diseases.

Virus. One kind of organism that causes disease.

Western Blot Test. A blood test used to detect antibodies to HIV. This test is used to confirm repeatedly positive or reactive results by two or more ELISAs. It is more specific than ELISA, more expensive, and more time consuming to conduct.

Zidovudine (AZT). An antiviral drug used to treat AIDS. It is the first drug to be approved for treatment of AIDS by the Federal Drug Administration.

AIDS Policies

HEALTH CARE AND BENEFITS

Persons with HIV/AIDS are entitled to the same level of care as workers with other catastrophic illnesses. According to the National Leadership Coalition on AIDS, the average cost of treating a person with AIDS—$85,000 life-time cost—is comparable to the cost of treating a person with cancer or heart disease.

Although new drug treatments for HIV/AIDS can be expensive, they allow persons with AIDS to live longer, more productive lives. Early treatment can delay the onset of AIDS symptoms or opportunistic infections, allowing employees to be productive for years.

OTHER COSTS

Providing AIDS education in the workplace and making accommodations for persons with AIDS can help mitigate other direct and indirect costs from AIDS incidents. These include:

- Handling disruptions from co-workers of a person with HIV/AIDS
- Reducing or eliminating legal costs associated with discrimination or privacy lawsuits
- Keeping active and on the job valuable human resources—people who may represent years of training and institutional memory
- Eliminating the need to recruit, hire, and train replacement workers.

In order to avoid problems concerning AIDS in the workplace, the National Leadership Coalition on AIDS suggests that employers take three basic steps:

- **Develop an HIV/AIDS policy.** You can adopt or adapt policies developed elsewhere (see sidebar, "Ten Principles for AIDS in the Workplace," page 6) or develop and implement your own workplace policy.
- **Train your supervisors and managers.** All supervisors and managers need to understand fully your written and unwritten workplace policies. In order to avoid discriminatory actions, supervisors and managers need to understand the employer's views and how the organization manages its policies.
- **Educate your employees and their families about AIDS.** Workplace AIDS educational programs have proven to be extremely valuable, especially where the program is comprehensive, given on company time, and where attendance at the program is mandatory.

AIDS WORKPLACE POLICIES

A comprehensive, written policy on AIDS and other catastrophic illnesses in the workplace is a first line of defense against the increased costs of lost productivity and possible lawsuits. Preparing policies before being faced by the circumstances of an employee with AIDS lays the groundwork for a compassionate response, allays fears coworkers may have about working with an employee with AIDS, and allows the person with AIDS a measure of security.

Although having a written AIDS policy in place before being confronted with a case of AIDS in the workplace is most effective, only about 10 percent of U.S. businesses currently have an HIV/AIDS policy. Having a policy in place will—

- Allay employee fear and reduce uncertainty about how the company will respond to job protection, disability claims, and other personnel concerns when someone is diagnosed with HIV
- Ensure a uniform, fair, and legal response in dealing with people with AIDS
- Underscore an employer's commitment to affirmative action policies by providing education and keeping employees in their positions.

AIDS is a stigmatizing and debilitating condition. As both a health condition and a social phenomenon, AIDS provokes fears, anxieties, and barriers of considerable magnitude.

B.J. Stiles
President
National Leadership
Coalition on AIDS

TEN PRINCIPLES FOR THE WORKPLACE

The following ten principles provide the basis for a fair, sensitive workplace policy for people with AIDS. Developed by The Citizens Commission of New York City and Northern New Jersey, the policy has been endorsed by more than 600 employers and promoted by The National Leadership Coalition on AIDS.

1. People with AIDS or HIV infection are entitled to the same rights and opportunities as people with other serious or life-threatening illnesses.

2. Employment policies must, at a minimum, comply with federal, state, and local laws and regulations.

3. Employment policies should be based on scientific and epidemiological evidence that people with AIDS or HIV infection do not pose a risk of transmission of the virus to co-workers through ordinary workplace contact.

4. The highest levels of management and union leadership should unequivocally endorse nondiscriminatory employment policies and educational programs about AIDS.

5. Employers and unions should communicate their support of these policies to workers in simple, clear, and unambiguous terms.

6. Employers should provide employees with sensitive, accurate, and up-to-date education about risk reduction in their personal lives.

7. Employers have a duty to protect the confidentiality of employees' medical information.

8. To prevent work disruption and rejection by co-workers of an employee with AIDS or HIV infection, employers and unions should undertake education for all employees before such an incident occurs and as needed thereafter.

9. Employers should not require HIV screening as part of preemployment or general workplace physical examinations.

10. In those special occupational settings where there may be a potential risk of exposure to HIV (for example, in health care, where workers may be exposed to blood or blood products), employers should provide specific, ongoing education and training, as well as the necessary equipment, to reinforce appropriate infection control procedures and ensure that they are implemented.

"An effective AIDS policy starts with a general statement of the company's position on the disease," writes Bill Patterson in the February 1989 issue of *Training & Development Journal*. He adds that "most companies find it effective to deal with AIDS the way they would deal with any other life-threatening illness."

By making a strong statement of its commitment to employee well-being, management reinforces its humanitarian concern for its employees' health, while confirming its guarantee of workplace safety.

An AIDS policy should include the following provisions:

- Workers with AIDS or other catastrophic illnesses should be able to work as long as they are able to perform the job and do not endanger themselves or the health and safety of their co-workers. Studies have found that work is therapeutic for people with AIDS in that it helps them cope with the disease. The workplace provides the security of a routine, established expectations, and an opportunity for positive social interactions.

- Employers should provide reasonable accommodations for workers with catastrophic illnesses. Reasonable accommodations may include flexible hours, more frequent breaks, medical time off, job restructurings or transfers, and working at home.

- All medical information should be kept confidential. Medical information about a worker's illness should not be communicated without the worker's consent.

- Employers should not test current employees or job applicants for the presence of HIV.

- Employers make mandatory and provide AIDS education to all employees. The program should include current, accurate information on AIDS, including discussions of life-style choices, and question-and-answer periods. The trainer, employee assistance program official, or another individual within the organization should be available after the course to answer questions that employees are reluctant to bring up in public and to make referrals, if requested.

- Employee benefit plans should be examined to ensure that they cover the needs of workers with catastrophic illnesses. Features may include:

  —Short- and long-term disability, sick leave, and leave banks.

  —Home health care which was designed for patients who require medical care but not the extensive care received in a hospital. Home health care includes health aides, home visits by doctors and nurses, and physical therapy.

  —Hospice care that provides support services and care to patients in the last phases of a catastrophic illness. The service is rendered in the person's home or in a hospice residential facility. Care includes nurses, social workers, attendants, and counselors.

  —Extended care facilities that provide care for individuals who need nursing care, but not hospital care.

  —Prescription drug coverage that includes payment for preventive medicines. Some insurance carriers have refused to cover prescription drugs used for preventive treatment of HIV/AIDS and other catastrophic illnesses.

- Workers with AIDS or other catastrophic illnesses should be treated with compassion and understanding; discrimination against them should not be tolerated.

- In dealing with workers with AIDS or catastrophic illnesses, the organization will follow all applicable state and federal laws and regulations.

TRAINING SUPERVISORS AND MANAGERS

Although general AIDS education programs are invaluable to all employees, managers and supervisors need additional training in how to handle workplace AIDS situations. These situations range from refusals by co-workers to continue to work with an employee with AIDS to determining how long an employee is able to work. Supervisor training should provide information on how to recognize and handle situations that may arise and convey the importance of maintaining confidentiality of medical and other information about an employee's health.

Many issues can be resolved by relying on the organization's existing personnel policies and procedures. Any equitable resolution should be based on a thorough assessment of each specific problem and how it involves correct information and guidance about AIDS, laws and regulations, and the employer's needs.

[W]orking effectively with HIV in the workplace is a necessary business skill for the '90s. Refusing to yield to fear is one way to reduce its impact and ease the pain.

Nancy L. Breuer
Personnel Journal

FOUR CRITICAL FACTS

The following four facts are vital to the understanding of AIDS:

- *HIV does not discriminate.* People of any race, age, sex, or sexual orientation can become infected with HIV if they engage in any high-risk activity. High-risk activity includes unprotected sexual contact or sharing needles with an HIV-infected person.
- *AIDS has no cure.* Although there is currently no cure for AIDS, some drug treatments now available can sometimes postpone the outset of AIDS symptoms.
- *HIV is hard to get.* HIV is not highly contagious. No evidence has been found to indicate that casual contact, such as shaking hands, touching, hugging, and sharing restrooms, spreads the disease. The virus must enter a person's bloodstream to survive; it cannot exist outside the body.
- *HIV can be prevented.* Workplace exposure to HIV-contaminated blood or body fluids is much less likely if workers and their employers are well trained; have proper, protective equipment; and adopt good work practices.

ABILITY TO WORK

During the course of the HIV infection, the employee or his or her supervisor may become concerned about the employee's ability to perform the duties of the position in a safe and reliable manner. The concern may result from serious attendance/job performance problems; inappropriate mental, emotional, or physical behaviors; unsatisfactory work; obvious poor health with no apparent corrective effort by the employee; or health problems that require work restrictions to ensure safety.

At this point, the supervisor may request that the employee undergo a fitness evaluation if available through the organization. The fitness evaluation is a medical examination to determine whether the individual has any physical problems that are causing the performance problem. To prepare a worker for the examination, the manager should schedule a meeting with the worker that includes the following:

- A discussion with the employee to ensure that he or she understands the reason for the evaluation and whether health could be a contributing factor
- Reassurance that the health evaluation is part of the employer's continuing efforts to assist and support the individual
- Acknowledgement that the referral for medical help is an attempt to help him or her resolve a problem that, if not corrected, could result in disciplinary action
- A pledge to keep the results of the medical evaluation confidential, but that the results will be discussed with the individual.

PRIVACY AND CONFIDENTIALITY

Because of the stigma attached to HIV infections, people with AIDS have concerns about losing their jobs, ostracism from the work group, or otherwise being discriminated against. Employers should ensure that all medical and personnel records on people with AIDS remain closely held.

Two other issues arise when a manager is confronted by a person with AIDS. If the person with AIDS confides in the manager, does the manager inform the person's work group of the infection to garner support for the person with AIDS? If the manager hears rumors about a person having AIDS, does he or she confirm or deny the rumor or otherwise take any action?

Despite what may be the manager's good intentions, he or she should never divulge information of any type confided by any person. The person with AIDS should have the option of telling his or her co-workers; that choice should never be co-opted by management. This allows the person with AIDS some control over his or her work environment, as well as maintaining the person's dignity.

SAMPLE AIDS POLICY

Philosophy

The organization embraces the following philosophy regarding the welfare of its employees:

- Employees with AIDS or any other life-threatening illness are treated with dignity and respect. The company strives to maintain an open and informed environment for all employees.
- Employees with AIDS or any other life-threatening illness can continue to work as long as they are physically able to.
- Employees are assured of complete confidentiality when seeking counseling or medical-referral assistance.

Commitment

The company has an overall commitment to health education. AIDS is a national health problem, and the company feels a responsibility to educate its employees so that prejudice and unwarranted fear about the disease can be eliminated in the workplace.

Benefits

AIDS is treated like any other life-threatening condition with respect to medical coverage, disability leave, and life insurance. As part of its comprehensive medical plan, the company offers _____

_____

_____

Hiring

- The company does not test prospective employees for AIDS and asks no AIDS screening questions on employment applications.
- The company is an equal opportunity employer and does not discriminate against persons because of sexual preference, gender, age, race, or religious beliefs.

Education

- The company has a comprehensive education program. The education package includes [for example] a videotape, brochures for employees, and manager-training materials. Sessions typically include an overview of the company's philosophy about AIDS, a discussion of how the disease is and is not contracted, a review of health benefits available to employees, an update on the latest information about AIDS, and a question-and-answer period.
- Pamphlets, company newsletters with articles on AIDS, and fact sheets are available to employees through the Employee Assistance Program (EAP) reference library. Samples of the health and fitness newsletters are included in the package.

Support Programs

- Individual, family, and group counseling is available for employees, co-workers, and families through EAP or can be arranged through outside agencies.
- EAP staff members have compiled a comprehensive list of agencies that will assist people with AIDS and will provide that information confidentially to any employee who requests it.

AIDS Task Force

- An employee task force supports a broad base of activities dealing with education and other AIDS issues. The group, which meets monthly, is made up of employees from divisions and departments throughout the company, including personnel, communications, community affairs, operations, and office services.
- The objectives of the employee task force include developing a comprehensive employee education program, raising AIDS-related issues and proposing action, providing assistance to other employers and organizations in developing their own AIDS programs, and obtaining support for AIDS organizations.

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Rumors about co-workers who may have AIDS need to be handled quickly and carefully. Such rumors may cause individuals with HIV infections to retreat from much-needed group support, put off getting needed medical attention, as well as robbing individuals of their dignity. Remind rumormongers of the harmful effects unfounded rumors may have on the life of another individual, emphasizing that even verified cases of AIDS in the workplace are covered by privacy and confidentiality rules.

CHANGES IN WORK ASSIGNMENTS

Reasonable accommodations, such as job sharing, transfers, restructurings, and flextime, should be granted if the person is no longer able to perform the duties of a particular job but is capable of fulfilling a different job. However, established policies governing placement, qualifications, and staffing requirements should be considered.

EMPLOYEE CONDUCT

Managers and supervisors may encounter employees who express reluctance or threaten refusal to work with HIV-infected employees. If the reluctance or threat disrupts the workplace, management should consider appropriate corrective (education) or disciplinary action against the disruptive employee. Most authorities recommend against acceding to requests from co-workers for transfers away from people with HIV/AIDS.

EMPLOYEE AIDS EDUCATION

The employee AIDS education program is a key component of an organization's AIDS policy: It builds trust, promotes compassion, and delineates employer expectations about how co-workers with AIDS will be treated. Often, myths, misperceptions, and misinformation about AIDS and how it is transmitted are at the core of AIDS-related workplace problems.

The AIDS education program should emphasize:

- **Ways that HIV is transmitted and not transmitted.** HIV can be transmitted only through certain high-risk behaviors: sexual intercourse without using a condom with an infected person, having oral sex without protection with an infected person, or sharing an unsterile drug injection device, or using unsterile needles in other situations, such as tattooing or piercing ears. HIV cannot be transmitted through the activities generally associated with work activity, such as hand shaking, sneezing, coughing, sharing dishes and cups, tools, telephones, computer keyboards, bathroom facilities, or drinking fountains. Additional training in preventive techniques should be given to those employees—doctors, nurses, custodial help, paramedics—who may be exposed to the virus in the course of their work. Although it is important for workers to understand their vulnerability to the disease, it is more important that they realize the disease is preventable.

- **Symptoms of HIV/AIDS.** People with HIV may have no symptoms. Over time, people with HIV may become more vulnerable to illness, such as cancer, pneumonia, hepatitis, and tuberculosis.

- **HIV/AIDS Misperceptions.** Many people believe that only certain high-risk groups—promiscuous homosexuals and drug abusers—can get HIV/AIDS. The course should cover in detail the high-risk behaviors responsible for the spread of the disease. The change in employee attitudes and behaviors is an important accomplishment for employee education.

- **Employer-provided benefits.** Any employee education program should contain periodic discussions of benefits provided by the employer to all employees with chronic or catastrophic illnesses, including HIV/AIDS. The discussion should cover health benefits, disability, job restructurings, and transfers. A point of contact for referral to the employee assistance or community-based programs should be provided.

- **Community-based assistance.** A list of community support programs and clinics should be provided to all employees. Having a representative of one of these programs participate in employee education programs will add credibility to the AIDS effort.

- **Question-and-answer period.** Every AIDS education program should end with a discussion or question-and-answer period, allowing workers to raise questions about transmittal of AIDS in the workplace and work policies. These discussions go a long way to eliminate fear and allow a rational, compassionate response. To maintain confidentiality and to facilitate questions concerning life styles, allow questions to be submitted on 3x5-inch cards.

WORKSHOP OUTLINE

One of the most effective ways to relieve the fears that many employees face when working with a person with AIDS or HIV is to provide compulsory AIDS education. An instructor experienced in presenting the information is invaluable, as are pre-packaged courses such as those provided through local chapters of the American Red Cross.

In developing an AIDS education program, work closely with any union or employee representative. Programs sponsored jointly by unions and management will convey the importance of the program to all employees. Contact community AIDS organizations, the public health department, or the National AIDS Clearinghouse for information, resources, publications, or further guidance to where appropriate materials can be found.

For a successful program, the American Federation of Labor-Congress of Industrial Organizations (AFL-CIO) recommends that its locals follow these steps:

- *Find out what employees want and need to know.* A formal or informal survey will allow you to determine what your employees' concerns are, how well informed they are about AIDS/HIV infections, and any misconceptions they hold that can be addressed through an AIDS education program. For example, workers in health care settings may want detailed procedures on the prevention and reporting of needlestick injuries.

- *Define who will attend the program.* Workers in jobs that have a high risk of transmittal—nurses, doctors, paramedics—require more specific education than those in jobs where the risk of contagion is low—clerical, office, and construction work. Some employers provide training not only for their employees, but also to their workers' family members.

- *Define the objectives and length of the workshop.* Base the training on the results of the needs analysis conducted in the first step. A general overview may take two to three hours, while training in safe work practices may take much longer.

- *Select a trainer.* Trainers are crucial to the success of any AIDS awareness course. The trainer may be a doctor, a public health expert, or an internal AIDS specialist. A person with AIDS might be asked to speak during the training program. Whoever is chosen, he or she should have:

  —Accurate knowledge about AIDS/HIV.

  —The ability to communicate clearly.

  —Experience in teaching AIDS workshops. Open forums, such as workshops, often include the raising of sensitive questions about transmittal and life styles. The instructor must be comfortable answering both medical and personal questions.

  —Knowledge of the work being done. Audiences vary according to the type of work they do. Ensure that the presenter is appropriate for your audience.

  —Sensitivity. The trainer must have an unbiased, nondiscriminatory attitude towards groups that have histories of high AIDS infection rates and should be willing to confront prejudice wherever it appears.

- *Plan the workshop.* In addition to lectures, AIDS education programs should include group discussions, question-and-answer periods, and may include videos, slides, or discussions by a panel of experts. The program should also provide current literature on AIDS in the workplace and cover the organization's AIDS policies. Remember to list sources for additional information or counseling.

- *Evaluate the workshop.* Survey the workers on their attitudes after the program to see whether further AIDS education is necessary.

BEST COPY AVAILABLE

Educating employees about AIDS can be extremely uncomfortable for both the employer and employees. A clear understanding of how AIDS is transmitted requires a frank discussion in a workplace setting of life-style choices, including sex. Employers need to be careful that these sensitive discussions aren't misconstrued as attempts to control or regulate the rightfully private affairs of its workers.

Several methods can help defuse this highly volatile area. One is to announce, at the beginning of the program, that employees will not be judged, have their jobs put on the line, or otherwise be penalized for their life-style choices. The trainer should make clear that the session is to provide the clear medical evidence that underlies the organization's policy on AIDS. (That policy, of course, will contain a nondiscrimination clause.)

A second way to make employees more comfortable with the program is to hire an outside professional to conduct the program. This approach has several advantages: First, most organizations do not have the necessary expertise in house, and, second, using an outside authority will help disassociate the organization from the highly sensitive material in the program.

Questions about the topics raised during the program should be limited to those related to the workplace. This protects employees from disclosing information about sexual proclivities or illegal drug use. Specific, personal questions about the transmission of HIV can be referred to the employee assistance program, to community-based counselors and clinics, or to national and state AIDS hotlines from whom they can obtain confidential information.

Attendance at AIDS education programs should be compulsory. This eliminates the perception that specific individuals or departments have a "problem." According to Jonathan A. Segal, a Philadelphia attorney, "Nonmandatory educational programs may have the unintended consequence of increasing the fear that they are intended to allay."

Conducting comprehensive workplace AIDS education programs can have a salubrious effect. A New York Business Group on Health survey shows that employees who were exposed to programs with videos, medical experts, and question-and-answer periods are more knowledgeable about the disease than those given less extensive programs. The study also finds that employees value more highly the efforts made by organizations with more comprehensive and compulsory programs.

AIDS: What Have We Learned

B.J. Stiles, president of the National Leadership Coalition on AIDS, reminds us that "AIDS is a stigmatizing and debilitating condition. As both a health condition and a social phenomenon, AIDS provokes fears, anxieties, and barriers of considerable magnitude." He cites four items that are "most pertinent" to the business leader concerned about AIDS:

- "AIDS is a long-haul commitment, not a short-term distraction.
- "Controversies and conflicts associated with AIDS will intensify.
- "The competition for resources will increase, and AIDS will heighten and exacerbate festering or unresolved social and racial conflicts.
- "No single resource is sufficient to bear the burden imposed by AIDS, and far greater inter-organizational collaboration is required."

Employer involvement in the fight against AIDS, given the high credibility of employer-provided AIDS education, is a first step in understanding and resolving the "controversies and conflicts" surrounding HIV/AIDS both in and out of the workplace.

For American business, as for Americans generally, AIDS is something like a mirror that, unwillingly and unexpectedly, we have come upon. The meaning of [Pacific Bell's] odyssey is this: in our reactions to AIDS, something of significance about ourselves and about the character of our enterprises is revealed.

David L. Kirp
Harvard Business Review

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The most important point is that AIDS is an illness. It is not a punishment. It can affect anyone, not just gays and not just drug users. No one asked for it. No one asked to die of AIDS.

AIDS in the Workplace: A Steward's Guide

RESOURCES

BOOKLETS

AIDS: An Employer's Guidebook. U.S. Chamber of Commerce, Washington, DC 20062.

AIDS Prevention Program in the Workplace. American National Red Cross AIDS Education Program, Washington, DC 20006.

Business and Labor Speak Out on AIDS. National Leadership Coalition on AIDS, Washington, DC 20036.

What Businesses Really Need to Know About AIDS. United Way of America, Alexandria, VA 22314.

ORGANIZATIONS

AFL-CIO
Department of Occupational Health and Safety
815 - 16th Street, NW
Washington, DC 20006
202/637-5203

AIDS Project Los Angeles
6721 Romaine Street
Los Angeles, CA 90038
213/962-1600

American Red Cross
Local Chapter or
Office of HIV/AIDS Education
National Headquarters
17th & D Streets, NW
Washington, DC 20006
202/434-4077

National AIDS Clearinghouse
P.O. Box 6003
Rockville, MD 20849-6003
800/458-5231

National Leadership Coalition on AIDS
1730 M Street, NW
Washington, DC 20036
202/429-0930

New England Corporate Consortium for AIDS Education
AIDS Program Office
Digital Equipment Corporation
111 Powder Mill Road
Maynard, MA 01754-1418
508/493-9580

San Francisco AIDS Foundation
25 Van Ness Avenue, Suite 660
San Francisco, CA 94102
415/864-5855

JOB AID: HIV/AIDS POLICY CHECKLIST

The following checklist will help you ensure that all areas of concern are covered in your HIV/AIDS policy:

I. Develop an HIV/AIDS policy.

The policy should include the assurance that—

- ❑ The policy is in compliance with federal, state, and local laws.
- ❑ Workers with AIDS will be able to work as long as they are able and do not endanger themselves or the health and safety of co-workers.
- ❑ Medical information will be kept confidential.
- ❑ Current employees and job applicants will not be tested for HIV/AIDS.
- ❑ AIDS education will be provided to all employees in order to alleviate co-worker concerns. Attendance at AIDS education programs is mandatory.
- ❑ Employee benefit plans cover the needs of workers with AIDS and other catastrophic illnesses. Provisions should include:
  - —Short- and long-term disability, sick leave, and leave banks
  - —Home health care
  - —Hospice care
  - —Extended-care facilities
  - —Prescription drug coverage for preventive medicines
- ❑ The employer will not discriminate against workers with AIDS or other catastrophic illnesses.

II. Supervisory and Managerial Training

In addition to general employee education, training for supervisory and managerial personnel should include—

- ❑ Procedures for determining an employee's ability to work.
- ❑ Policies regarding privacy and confidentiality.
- ❑ Procedures for changes in work assignments, for both workers with AIDS and co-workers concerned about working with people with AIDS.
- ❑ Appropriate disciplinary action for disruptive employees.

III. Employee AIDS Education

AIDS education for the general work population should cover—

- ❑ Ways that HIV/AIDS is transmitted and not transmitted.
- ❑ How to prevent the spread of AIDS.
- ❑ Misperceptions about HIV/AIDS.
- ❑ Symptoms of HIV/AIDS.
- ❑ Summary of company policies and employer-provided benefits.
- ❑ How to respond to a co-worker infected with or thought to have HIV/AIDS.
- ❑ Review of community-based assistance.
- ❑ Question-and-answer period.

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